	SAUGETZ-Q, IL-#1			
on the reverse side?	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space		I also wish to receive the following services (for an extra fee): 1.	Service.
	does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.		2. Restricted Delivery Consult postmaster for fee.	eceipt
ğ	3. Article Addressed to:		icle Number	Œ
ADDRESS complete	Ms. LORETTA LOPINOT	4b. Ser	Z 383 550 46 46. Service Type	
	CAHOKIA PUBLIC LIBRARY		☐ Registered ☐ Insured ☐ COD	
	140 CAHDKIA PARK DR.	Express Mail Return Receipt for Merchandise 7. Date of Delivery 3-30-95		7 g g
	CAHOKIA, IL 62206			
TURN	5. Signature (Addressee)	Addressee's Address (Only if requested and fee is paid)		
our RE	8. Dolly Ladek			F :
<u> </u>	YPS Form 3811, Discember 1991	-/14 D(OMESTIC RETURN RECEIPT	ſ